PART B - FEE(S) TRANSMITTAL

JUL 2 8 2005	his form, together wit		or Fax	P.O. Box 1450 Alexandria, Virg (703) 746-4000	or Patents ginia 22313-1450				
INSTRUCTIONS: This for appropriate. All further con indicated unless corrected maintenance for appropriate the second sec	m should be used for transported including the below or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a)	E FEE and PUB ders and notificat) specifying a nev	LICATION FEE (if requion of maintenance fees was correspondence address)	ired). Blocks I through 5 s vill be mailed to the current and/or (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for			
CURRENT CORRESPONDENC	DE ADDRESS (Note: Use Block 1 for 05/26/2005	any change of address)		Note: A certificate of Fee(s) Transmittal. The papers. Each additional	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanyin papers. Each additional paper, such as an assignment or formal drawing, mutave its own certificate of mailing or transmission.				
TIMOTHY E SII 1868 KNAPPS AL SUITE 206	EGEL LLEY			Cer I hereby certify that the States Postal Service addressed to the Mai transmitted to the USF	rtificate of Mailing or Trans his Fee(s) Transmittal is bein with sufficient postage for fir I Stop ISSUE FEE address TO (703) 746-4000, on the co	smission g deposited with the United st class mail in an envelop- above, or being facsimile late indicated below.			
WEST LINN, OR 9/2005 RMEBRAH1 00000	ó56 10822491					(Depositor's name)			
C:1501	:1501 1400.00 OP					(Signature)			
			DID OT MANAGED DA	L	A TTORNEY DOCKET NO	CONFIRMATION NO.			
APPLICATION NO. 10/822,491	04/12/2004	<u> </u>	FIRST NAMED INV John W. Swai		MH1.238	3021			
	LEXIBLE BIO-PROBE AS					DAME TYPE			
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	NO	\$1400)	\$0	\$1400	08/26/2005			
EXAN	EXAMINER .		. ART UNIT]				
COHEN	N, LEE S	3739		600-378000					
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON T			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) data will appear on the patent. If an assignee is identified below, the document has been filed of a substitute for filing an assignment.						
recordation as set forth in (A) NAME OF ASSIGN				off the patent. If an assignifiling an assignment. CITY and STATE OR CO		dealine in the second in the second			
	Advanced Neuromodulation			Plano, TX					
	e assignee category or category				orporation or other private gr	oup entity Governme			
4a. The following fee(s) are	enclosed:	4b	D. Payment of Fee(• •	nclosed				
Issue Fee ☐ Publication Fee (No small entity discount permitted)			△ A check in the amount of the fee(s) is enclosed. □ Payment by credit card. Form PTO-2038 is attached.						
			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, Deposit Account Number (enclose an extra copy of this form).						
5 Change in Entity Status	(from status indicated above	e)	Deposit Account	. Indinoci	(Chelose an extra (copy of uns form).			
a. Applicant claims S	MALL ENTITY status. See	37 CFR 1.27.			LL ENTITY status. See 37 C				
The Director of the USPTO NOTE: The Issue Fee and F interest as shown by the rec	is requested to apply the Iss Publication Fee (if required) ords of the United States Pat	ue Fee and Publicate will not be accepted tent and Trademark	tion Fee (if any) o d from anyone oth Office.	r to re-apply any previous er than the applicant; a reg	ly paid issue fee to the applic sistered attorney or agent; or t	ation identified above. the assignee or other party			
Authorized Signature	Vimotay E	Lugel	3	Date	TV/4 26, 2	005			
Typed or printed name _	Typed or printed name Timothy E. Siegel			Registration No. 37,442					
This collection of informati	on is required by 37 CFR 1.3	311. The information. 122 and 37 CFR 10. Time will vary	on is required to ol 1.14. This collection depending upon	btain or retain a benefit by	the public which is to file (an minutes to complete, includi omments on the amount of ti Trademark Office, U.S. Dep	nd by the USPTO to proce ng gathering, preparing, a ime you require to complete			

BOX 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity) (37 C.F.R. 1.311)						Docket No. MH1,238					
<u> </u>											
Applicant	(s): John	W. Swanson									
Applicati	ion No.	Filing Date	Examiner		Customer No.	Group Art Unit	Confirmation No.				
10/822	2,491	04/12/2004	Lee S. Coher	1	23893	3739	3021				
JUL 2	8 2005	KIBLE BIO-PROBE	ASSEMBLY								
PIEMTS IR		9	Mail Stop Is COMMISSIONER I		ENTS						
CAT & TR	ADEMART		P.O. Box	1450							
			Alexandria, VA								
		,	or the above-identifie	d applicat	ion.						
		nsmittal Form PTOL			_						
	y Fee:	31400.00	Design Fee:			Plant Fee:					
	ication Fe			al .							
		•	100.00 is attache		count No	50 1151	,				
	The Director is hereby authorized to charge and credit Deposit Account No. 50-1152 as described below.										
	□ Charge the amount of										
- [⊠ Cre	dit any overpayment	t.								
(⊠ Cha	arge any additional fe	ee required.								
☐ Payn	nent by c	redit card. Form PT0	D-2038 is attached.								
WAR be in	RNING: In	nformation on this fon this form. Provide	form may become pude credit card inform	ublic. Cre nation an	edit card infori d authorizatio	mation should n on PTO-2038	not				
0	in	Signature	Lel	Dated:	July 26, 2005	;					
		Ü									
		•									
cc:											
00.		cate of Transmission by	ed if paying		Certificate of M	ailing by First Cla	ss Mail				
L certif	fy that this	by deposit account. document and authorizat		Lhoroby	cortify that this o	orrespondence is be	ing denocited with				
accour	nt is being 1	facsimile transmitted to the fice (Fax No.	•	the Unite	ed States Postal S til in an envelope ac	direspondence is be service with sufficier Idressed to "Commis VA 22313-1450" [37	nt postage as first sioner for Patents,				
	Dist.				07/26/2005						
	(Date)				(Date)	1. Javan					
	· · · · · · · · · · · · · · · · · · ·	Signature			Signature of Pers	on Mailing Correspon	ndence				
					Dani	iel M. Savage					
T	um and our During	rad Nama of Parson Signing	Cartificata	Tun		of Parson Mailing Co					